

Fill in this information to identify your case and this filing:

| | | | |
|---|--------------------|-----------------|--------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: Northern | | District of | Texas |
| Case number | 25-40689-13 | | |

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1 3524 Paladin PI

Street address, if available, or other description

Fort Worth, TX 76137-6611

City State ZIP Code

Tarrant

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$410,000.00

Current value of the portion you own?

\$410,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Homestead

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

Source of Value: TAD

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here →

\$410,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

Debtor Hare, Korto NyemadahCase number (if known) 25-40689-13

| | | | | |
|-----|-----------------------------------|--|--|---------------------------------------|
| 3.1 | Make: <u>Honda</u> | Who has an interest in the property? Check one. | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> . | |
| | Model: <u>Odyssey</u> | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | Year: <u>2023</u> | <input type="checkbox"/> Check if this is community property (see instructions) | <u>\$36,925.00</u> | <u>\$36,925.00</u> |
| | Approximate mileage: <u>40044</u> | | | |
| | Other information: | | | |
| | Source of Value: NADA | | | |

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

| | | | | |
|-----|----------------------|---|--|---------------------------------------|
| 4.1 | Make: _____ | Who has an interest in the property? Check one. | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> . | |
| | Model: _____ | <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | Year: _____ | <input type="checkbox"/> Check if this is community property (see instructions) | _____ | _____ |
| | Other information: | | | |
| | <input type="text"/> | | | |

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here →

\$36,925.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- No
 Yes. Describe.

See Attached.\$2,900.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No
 Yes. Describe.

MacBook\$1,100.00**TVs**

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8. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.

.....

9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.

.....

10. **Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.

Glock 43

\$500.00

11. **Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.

\$1,000.00

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.

Ring

\$1,200.00

13. **Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe.

.....

14. **Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Give specific information.

.....

15. **Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**



\$6,700.00

Part 4: Describe Your Financial Assets

| Do you own or have any legal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--|--|--|
| 16. Cash | | |
| <i>Examples:</i> Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | |
| <input type="checkbox"/> No | | |
| <input checked="" type="checkbox"/> Yes | | Cash: \$5,000.00 |
| 17. Deposits of money | | |
| <i>Examples:</i> Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. | | |
| <input type="checkbox"/> No | | |
| <input checked="" type="checkbox"/> Yes | | Institution name: |
| | | Chase |
| 17.1. Checking account: | | Account Number: XXXXXXXXXXXX0036 \$8,629.00 |
| 18. Bonds, mutual funds, or publicly traded stocks | | |
| <i>Examples:</i> Bond funds, investment accounts with brokerage firms, money market accounts | | |
| <input checked="" type="checkbox"/> No | | |
| <input type="checkbox"/> Yes | | Institution or issuer name: <hr/> <hr/> <hr/> |
| 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture | | |
| <input checked="" type="checkbox"/> No | | |
| <input type="checkbox"/> Yes. Give specific information about them..... | | Name of entity: <hr/> <hr/> <hr/> |
| | | % of ownership: <hr/> <hr/> <hr/> |
| 20. Government and corporate bonds and other negotiable and non-negotiable instruments | | |
| <i>Negotiable instruments</i> include personal checks, cashiers' checks, promissory notes, and money orders. <i>Non-negotiable instruments</i> are those you cannot transfer to someone by signing or delivering them. | | |
| <input checked="" type="checkbox"/> No | | |
| <input type="checkbox"/> Yes. Give specific information about them..... | | Issuer name: <hr/> <hr/> <hr/> |

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: _____

Pension plan: _____

IRA: _____

Retirement account: _____

Keogh: _____

Additional account: _____

Additional account: _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes Institution name or individual:

Electric: _____

Gas: _____

Heating oil: _____

Security deposit on rental unit: _____

Prepaid rent: _____

Telephone: _____

Water: _____

Rented furniture: _____

Other: _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes Issuer name and description:

Debtor Hare, Korto Nyemadah

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24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them.

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them.

27. **Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them.

Money or property owed to you?

**Current value of the portion you own?
Do not deduct secured claims or exemptions.**

28. **Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.

2024 Tax Refund

Federal:

\$9,989.00

State:

.....

Local:

.....

29. **Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

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No

Yes. Give specific information.

| |
|--|
| |
|--|

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information.

| |
|--|
| |
|--|

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information.

| |
|--|
| |
|--|

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.

| |
|--|
| |
|--|

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe each claim.

| |
|--|
| |
|--|

35. Any financial assets you did not already list

No

Yes. Give specific information.

| |
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| |
|--|

Debtor Hare, Korto Nyemadah

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36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here → \$23,618.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.
 Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

No
 Yes. Describe.

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No
 Yes. Describe. Esthetician Equipment \$6,500.00
Office Furniture

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
 Yes. Describe.

41. Inventory

No
 Yes. Describe. Esthetician Products \$1,800.00

42. Interests in partnerships or joint ventures

No
 Yes. Describe

Name of entity: _____ % of ownership: _____

43. Customer lists, mailing lists, or other compilations

No

Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No

Yes. Describe.

| | |
|--|--|
| | |
|--|--|

44. Any business-related property you did not already list

No

Yes. Give specific information

7000 Northeast Loop 820, North Richland Hills, Texas 76180 \$460,000.00

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$468,300.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No

Yes

| | |
|--|--|
| | |
|--|--|

48. Crops—either growing or harvested

No

Yes. Give specific information.

| | |
|--|--|
| | |
|--|--|

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No

Yes

| | |
|--|--|
| | |
|--|--|

50. Farm and fishing supplies, chemicals, and feed

No

Yes

| | |
|--|--|
| | |
|--|--|

Debtor Hare, Korto Nyemadah

Case number (if known) 25-40689-13

51. Any farm- and commercial fishing-related property you did not already list

No

Yes. Give specific information.

| | |
|--|--|
| | |
|--|--|

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here



\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

Yes. Give specific information.

| | |
|--|--|
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| | |

54. Add the dollar value of all of your entries from Part 7. Write that number here



\$0.00

Part 8: List the Totals of Each Part of this Form

| | | |
|--|---|--------------------------------|
| 55. Part 1: Total real estate, line 2 | → | \$410,000.00 |
| 56. Part 2: Total vehicles, line 5 | | <u>\$36,925.00</u> |
| 57. Part 3: Total personal and household items, line 15 | | <u>\$6,700.00</u> |
| 58. Part 4: Total financial assets, line 36 | | <u>\$23,618.00</u> |
| 59. Part 5: Total business-related property, line 45 | | <u>\$468,300.00</u> |
| 60. Part 6: Total farm- and fishing-related property, line 52 | | <u>\$0.00</u> |
| 61. Part 7: Total other property not listed, line 54 | + | <u>\$0.00</u> |
| 62. Total personal property. Add lines 56 through 61. | | <u>\$535,543.00</u> |
| | | Copy personal property total → |
| | + | <u>\$535,543.00</u> |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62. | | <u>\$945,543.00</u> |

Continuation Page

| | | |
|----|---------------------------------|----------|
| 6. | Household goods and furnishings | |
| | Beds | \$900.00 |
| | Couch | \$150.00 |
| | Dining Table | \$800.00 |
| | Dressers | \$500.00 |
| | Refrigerator | \$100.00 |
| | Stove | \$450.00 |

Fill in this information to identify your case:

| | | | |
|---|--------------|--------------------------|-------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: Northern | | District of Texas | |
| Case number 25-40689-13 (if known) | | | |

 Check if this is an amended filingOfficial Form 106CSchedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim <i>Check only one box for each exemption.</i> | Specific laws that allow exemption |
|--|--------------------------------------|---|---|
| Copy the value from <i>Schedule A/B</i> | | | |
| Brief description: 3524 Paladin PI Fort Worth, TX 76137-6611 | \$410,000.00 | <input checked="" type="checkbox"/> \$190,351.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-002 |
| Line from <i>Schedule A/B</i> : 1.1 | | | |
| Brief description: 2023 Honda Odyssey | \$36,925.00 | <input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | Tex. Prop. Code §§ 42.001(a), 42.002(a)(9) |
| Line from <i>Schedule A/B</i> : 3.1 | | | |

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim <i>Check only one box for each exemption.</i> | Specific laws that allow exemption |
|---|---------------------|--|---|---|
| Brief description: | <u>Couch</u> | <u>\$150.00</u> | <input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>6</u> | | | |
| Brief description: | <u>Dining Table</u> | <u>\$800.00</u> | <input checked="" type="checkbox"/> <u>\$800.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>6</u> | | | |
| Brief description: | <u>Stove</u> | <u>\$450.00</u> | <input checked="" type="checkbox"/> <u>\$450.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>6</u> | | | |
| Brief description: | <u>Refrigerator</u> | <u>\$100.00</u> | <input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>6</u> | | | |
| Brief description: | <u>Beds</u> | <u>\$900.00</u> | <input checked="" type="checkbox"/> <u>\$900.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>6</u> | | | |
| Brief description: | <u>Dressers</u> | <u>\$500.00</u> | <input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>6</u> | | | |
| Brief description: | <u>TVs</u> | <u>\$600.00</u> | <input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>7</u> | | | |
| Brief description: | <u>MacBook</u> | <u>\$500.00</u> | <input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u> |
| Line from Schedule A/B: | <u>7</u> | | | |
| Brief description: | <u>Glock 43</u> | <u>\$500.00</u> | <input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(7)</u> |
| Line from Schedule A/B: | <u>10</u> | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim <i>Check only one box for each exemption.</i> | Specific laws that allow exemption |
|---|------------------------------|--|---|---|
| Brief description: | <u>Clothes</u> | <u>\$1,000.00</u> | <input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)</u> |
| Line from Schedule A/B: | <u>11</u> | | | |
| Brief description: | <u>Ring</u> | <u>\$1,200.00</u> | <input checked="" type="checkbox"/> <u>\$1,200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)</u> |
| Line from Schedule A/B: | <u>12</u> | | | |
| Brief description: | <u>Office Furniture</u> | <u>\$2,500.00</u> | <input checked="" type="checkbox"/> <u>\$2,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(4)</u> |
| Line from Schedule A/B: | <u>39</u> | | | |
| Brief description: | <u>Esthetician Equipment</u> | <u>\$4,000.00</u> | <input checked="" type="checkbox"/> <u>\$4,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(4)</u> |
| Line from Schedule A/B: | <u>39</u> | | | |
| Brief description: | <u>Esthetician Products</u> | <u>\$1,800.00</u> | <input checked="" type="checkbox"/> <u>\$1,800.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | <u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(4)</u> |
| Line from Schedule A/B: | <u>41</u> | | | |

Fill in this information to identify your case:

| | | | |
|---|--------------|-----------------|--------------------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | Northern | District of Texas |
| Case number (if known) 25-40689-13 | | | |

 Check if this is an amended filingOfficial Form 106DSchedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

| Part 1: List All Secured Claims | | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|---------------------------------|--|---|---|--|
| 2.1 | Mr Cooper/United Wholesale Mortgage Creditor's Name Attn: Bankruptcy PO Box 619098 Number Street Dallas, TX 75261-9741 City State ZIP Code | Describe the property that secures the claim: 3524 Paladin PI Fort Worth, TX 76137-6611 | \$219,649.00 | \$410,000.00 |
| | | As of the date you file, the claim is: Check all that apply. | | |
| | | <input type="checkbox"/> Contingent | | |
| | | <input type="checkbox"/> Unliquidated | | |
| | | <input type="checkbox"/> Disputed | | |
| | | Nature of lien. Check all that apply. | | |
| | | <input type="checkbox"/> Debtor 1 only | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) | |
| | | <input type="checkbox"/> Debtor 2 only | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) | |
| | | <input type="checkbox"/> Debtor 1 and Debtor 2 only | <input type="checkbox"/> Judgment lien from a lawsuit | |
| | | <input checked="" type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Other (including a right to offset) _____ | |
| | | <input type="checkbox"/> Check if this claim relates to a community debt | | |
| | Date debt was incurred 5/1/2018 | Last 4 digits of account number 7 1 9 9 | | |
| | Add the dollar value of your entries in Column A on this page. Write that number here: \$219,649.00 | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13

| Part 1: | Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. | Column A | Column B | Column C |
|----------------|---|--|---|------------------------------------|
| | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |

2.2 NAVY FCU

Creditor's Name
Attn: Bankruptcy

PO Box 3000

Number Street
Merrifield, VA 22119-3000

City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 8/1/2023

Describe the property that secures the claim: **2023 Honda Odyssey**

As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Last 4 digits of account number 5 0 8 3

2.3 Velocity Commercial Capital LLC

Creditor's Name
2945 Townsgate Rd Ste 110

Number Street
Westlake Vlg, CA 91361-5865

City State ZIP Code

Who owes the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred _____

Describe the property that secures the claim: **unknown**

As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here: \$48,043.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$267,692.00

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1. MRLP, LLC

Name

1320 Greenway Dr Ste 780

Number Street

Irving, TX 75038-2550

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? 2.3Last 4 digits of account number - - -

Fill in this information to identify your case:

| | | | |
|--|--------------|-----------------|--------------------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | Northern | District of Texas |
| Case number 25-40689-13 (if known) | | | |

 Check if this is an amended filingOfficial Form 106E/FSchedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| | Total claim | Priority amount | Nonpriority amount |
|--|-------------|-----------------|--------------------|
| | \$3,108.00 | \$3,108.00 | \$0.00 |

| | | | | | |
|-----|--|--|----------------------------------|--------------------------------------|-------------------------------------|
| 2.1 | Wegner Law PLLC Priority Creditor's Name 9500 Ray White Rd Ste 200 Number Street Fort Worth, TX 76244-9105 City State ZIP Code | Last 4 digits of account number _____ | Total claim \$3,108.00 | Priority amount \$3,108.00 | Nonpriority amount \$0.00 |
| | | When was the debt incurred? _____ | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | |
| | | Type of PRIORITY unsecured claim: | | | |
| | | <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify Attorney Fees | | | |
| | | Is the claim subject to offset? | | | |
| | | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

| | | Total claim |
|--|-------------|--|
| 4.1 | Amex | Last 4 digits of account number <u>4 4 6 3</u> \$10,575.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? <u>12/1/2021</u> |
| Correspondence/Bankruptcy | | |
| PO Box 981540 | | As of the date you file, the claim is: Check all that apply. |
| Number | Street | <input type="checkbox"/> Contingent |
| El Paso, TX 79998 | | <input type="checkbox"/> Unliquidated |
| City | State | <input type="checkbox"/> Disputed |
| Who incurred the debt? Check one. | | |
| <input checked="" type="checkbox"/> Debtor 1 only | | |
| <input type="checkbox"/> Debtor 2 only | | |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only | | |
| <input type="checkbox"/> At least one of the debtors and another | | |
| <input type="checkbox"/> Check if this claim is for a community debt | | |
| Type of NONPRIORITY unsecured claim: | | |
| <input type="checkbox"/> Student loans | | |
| <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts | | |
| <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | |
| Is the claim subject to offset? | | |
| <input checked="" type="checkbox"/> No | | |
| <input type="checkbox"/> Yes | | |
| 4.2 | Amex | Last 4 digits of account number <u>7 3 4 3</u> \$5,002.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? <u>5/1/2023</u> |
| Correspondence/Bankruptcy | | |
| PO Box 981540 | | As of the date you file, the claim is: Check all that apply. |
| Number | Street | <input type="checkbox"/> Contingent |
| El Paso, TX 79998 | | <input type="checkbox"/> Unliquidated |
| City | State | <input type="checkbox"/> Disputed |
| Who incurred the debt? Check one. | | |
| <input checked="" type="checkbox"/> Debtor 1 only | | |
| <input type="checkbox"/> Debtor 2 only | | |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only | | |
| <input type="checkbox"/> At least one of the debtors and another | | |
| <input type="checkbox"/> Check if this claim is for a community debt | | |
| Type of NONPRIORITY unsecured claim: | | |
| <input type="checkbox"/> Student loans | | |
| <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts | | |
| <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | |
| Is the claim subject to offset? | | |
| <input checked="" type="checkbox"/> No | | |
| <input type="checkbox"/> Yes | | |

Debtor 1

KortoNyemadahHare

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13

Part 2:

Your NONPRIORITY Unsecured Claims – Continuation Page

| After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. | | | | Total claim |
|--|-------------|--|-------------------------------------|-------------------|
| 4.3 | Amex | Last 4 digits of account number | <u>0</u> <u>8</u> <u>0</u> <u>3</u> | \$4,238.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| Correspondence/Bankruptcy | | <u>5/1/2018</u> | | |
| PO Box 981540 | | As of the date you file, the claim is: Check all that apply. | | |
| Number | Street | <input type="checkbox"/> Contingent | | |
| El Paso, TX 79998 | | <input type="checkbox"/> Unliquidated | | |
| City | State | <input type="checkbox"/> Disputed | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 4.4 | Amex | Last 4 digits of account number | <u>6</u> <u>4</u> <u>7</u> <u>3</u> | \$4,077.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| Correspondence/Bankruptcy | | <u>3/1/2022</u> | | |
| PO Box 981540 | | As of the date you file, the claim is: Check all that apply. | | |
| Number | Street | <input type="checkbox"/> Contingent | | |
| El Paso, TX 79998 | | <input type="checkbox"/> Unliquidated | | |
| City | State | <input type="checkbox"/> Disputed | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | | |
|--|-------------|--|-------------------------------------|------------|
| 4.5 | Amex | Last 4 digits of account number | <u>5</u> <u>4</u> <u>6</u> <u>3</u> | \$1,114.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| Correspondence/Bankruptcy | | <u>8/1/2017</u> | | |
| PO Box 981540 | | As of the date you file, the claim is: Check all that apply. | | |
| Number | Street | <input type="checkbox"/> Contingent | | |
| El Paso, TX 79998 | | <input type="checkbox"/> Unliquidated | | |
| City | State | <input type="checkbox"/> Disputed | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 4.6 | Amex | Last 4 digits of account number | <u>2</u> <u>3</u> <u>6</u> <u>3</u> | \$1,054.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| Correspondence/Bankruptcy | | <u>5/1/2018</u> | | |
| PO Box 981540 | | As of the date you file, the claim is: Check all that apply. | | |
| Number | Street | <input type="checkbox"/> Contingent | | |
| El Paso, TX 79998 | | <input type="checkbox"/> Unliquidated | | |
| City | State | <input type="checkbox"/> Disputed | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | |
|-----|---|--|------------|
| 4.7 | Capital One Nonpriority Creditor's Name Attn Bankruptcy | Last 4 digits of account number <u>8 0 4 1</u> | \$5,579.00 |
| | Po Box 31293 Number Street Salt Lake City, UT 84131-0293 | When was the debt incurred? <u>12/1/2021</u> | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| | Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u> | |
| | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 4.8 | Capital One Nonpriority Creditor's Name Attn Bankruptcy | Last 4 digits of account number <u>2 2 3 2</u> | \$3,101.00 |
| | Po Box 31293 Number Street Salt Lake City, UT 84131-0293 | When was the debt incurred? <u>5/1/2016</u> | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| | Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | |
| | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | | |
|------|--|--|-------------------------------------|-------------|
| 4.9 | Capital One Nonpriority Creditor's Name Attn Bankruptcy | Last 4 digits of account number | <u>4</u> <u>3</u> <u>9</u> <u>7</u> | \$2,436.00 |
| | Po Box 31293 Number Street Salt Lake City, UT 84131-0293 | When was the debt incurred? | <u>11/1/2016</u> | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | |
| | Is the claim subject to offset? | | | |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| 4.10 | CarMax Auto Finance Nonpriority Creditor's Name 225 Chastain Mdws | Last 4 digits of account number | <u>3</u> <u>8</u> <u>1</u> <u>3</u> | \$23,508.00 |
| | Number Street Kennesaw, GA 30144-5897 | When was the debt incurred? | <u>8/1/2021</u> | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____ | | |
| | Is the claim subject to offset? | | | |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | |
|---|---|---|-------------|
| 4.11 | Credit Collection Services Nonpriority Creditor's Name Attn: Bankruptcy | Last 4 digits of account number <u>7 0 7 4</u> | \$793.00 |
| 725 Canton St Number Street Norwood, MA 02062-2679 | | When was the debt incurred? <u>7/1/2024</u> | |
| City State ZIP Code | | As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Attorney</u> | |
| Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| 4.12 | Discover Financial Nonpriority Creditor's Name Attn: Bankruptcy | Last 4 digits of account number <u>6 3 6 0</u> | \$12,828.00 |
| Po Box 30924 Number Street Salt Lake Cty, UT 84130-0924 | | When was the debt incurred? <u>8/1/2017</u> | |
| City State ZIP Code | | As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | |
| Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | | |
|--|--------------------------------|---|----------------|-------------|
| 4.13 | Discover Personal Loans | Last 4 digits of account number | <u>9 1 9 4</u> | \$14,142.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| Attn: Bankruptcy | | <u>6/1/2022</u> | | |
| PO Box 30954 | | As of the date you file, the claim is: Check all that apply. | | |
| Number Street | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| Salt Lake City, UT 30954 | | | | |
| City | State | ZIP Code | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 4.14 | Jpmcb | Last 4 digits of account number | <u>0 5 8 3</u> | \$4,799.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| MailCode LA4-7100 700 Kansas Lane | | <u>12/1/2021</u> | | |
| Number Street | | As of the date you file, the claim is: Check all that apply. | | |
| Monroe, LA 71203 | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| City State ZIP Code | | | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | | |
|------|--|---|-------------------------------------|-------------|
| 4.15 | Jpmcb Nonpriority Creditor's Name MailCode LA4-7100 700 Kansas Lane Number Street | Last 4 digits of account number | <u>3</u> <u>6</u> <u>5</u> <u>0</u> | \$839.00 |
| | | When was the debt incurred? | <u>7/1/2017</u> | |
| | | As of the date you file, the claim is: Check all that apply. | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| | | Type of NONPRIORITY unsecured claim: | | |
| | | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | |
| | | Is the claim subject to offset? | | |
| | | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 4.16 | NAVY FCU Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3302 Number Street | Last 4 digits of account number | <u>5</u> <u>8</u> <u>4</u> <u>0</u> | \$15,817.00 |
| | | When was the debt incurred? | <u>6/1/2022</u> | |
| | | As of the date you file, the claim is: Check all that apply. | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| | | Type of NONPRIORITY unsecured claim: | | |
| | | <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>UnknownLoanType</u> | | |
| | | Is the claim subject to offset? | | |
| | | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim

| | | | | |
|---|----------------------------------|---------------------------------|----------------|-------------|
| 4.17 | Navy Federal Credit Union | Last 4 digits of account number | <u>5 8 4 0</u> | \$15,817.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| PO Box 3000 | | <u>6/1/2022</u> | | |
| Number | Street | | | |
| Merrifield, VA 22119-3100 | | | | |
| City | State | ZIP Code | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 4.18 | Online Collections | Last 4 digits of account number | <u>7 5 0 7</u> | \$416.00 |
| Nonpriority Creditor's Name | | When was the debt incurred? | | |
| Pob 1489 | | <u>7/1/2024</u> | | |
| Number | Street | | | |
| Winterville, NC 28590 | | | | |
| City | State | ZIP Code | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Attorney</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | | |
|--|--|---------------------------------|-------------------------------------|------------|
| 4.19 | Synccb/Home Design Nahf Nonpriority Creditor's Name Attn: Bankruptcy | Last 4 digits of account number | <u>8</u> <u>9</u> <u>9</u> <u>1</u> | \$54.00 |
| PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code | | When was the debt incurred? | | |
| As of the date you file, the claim is: Check all that apply. | | | | |
| <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 4.20 | Transworld System Inc Nonpriority Creditor's Name Attn: Bankruptcy | Last 4 digits of account number | <u>8</u> <u>0</u> <u>4</u> <u>6</u> | \$1,034.00 |
| Po Box 15130 Number Street Wilmington, DE 19850-5130 City State ZIP Code | | When was the debt incurred? | | |
| As of the date you file, the claim is: Check all that apply. | | | | |
| <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |
| Who incurred the debt? Check one. | | | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of NONPRIORITY unsecured claim: | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CollectionAttorney</u> | | | | |
| Is the claim subject to offset? | | | | |
| <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Debtor 1

Korto**Nyemadah****Hare**

First Name

Middle Name

Last Name

Case number (if known) 25-40689-13**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

| | | Total claim |
|---------------------------------|--|-------------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. <u>\$0.00</u> |
| | 6b. Taxes and certain other debts you owe the government | 6b. <u>\$0.00</u> |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. <u>\$0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. + <u>\$3,108.00</u> |
| | 6e. Total. Add lines 6a through 6d. | <u>\$3,108.00</u> |

| | | Total claim |
|---------------------------------|---|---------------------------|
| Total claims from Part 2 | 6f. Student loans | 6f. <u>\$0.00</u> |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. <u>\$0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. <u>\$0.00</u> |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. + <u>\$127,223.00</u> |
| | 6j. Total. Add lines 6f through 6i. | <u>\$127,223.00</u> |

Fill in this information to identify your case:

| | | | |
|--|--------------|-----------------|--------------------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | Northern | District of Texas |
| Case number 25-40689-13 (if known) | | | |

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease | | State what the contract or lease is for | |
|-----|--|--------|---|--|
| 2.1 | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.2 | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.3 | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.4 | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |

Fill in this information to identify your case:

| | | | |
|---|--------------|--------------------------|-------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: Northern | | District of Texas | |
| Case number 25-40689-13 (if known) | | | |

 Check if this is an amended filingOfficial Form 106HSchedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

| Column 1: Your codebtor | Column 2: The creditor to whom you owe the debt |
|---------------------------------|---|
| Check all schedules that apply: | |
| 3.1 | <input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____ |
| Name | |
| Number Street | |
| City State ZIP Code | |
| 3.2 | <input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____ |
| Name | |
| Number Street | |
| City State ZIP Code | |

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-----------------|-------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | Northern District of Texas | | |
| Case number (if known) | 25-40689-13 | | |

Check if this is:

- An amended filing
 - A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

| | Debtor 1 | Debtor 2 or non-filing spouse | |
|---------------------------------|--|---|-----------------|
| Employment status | <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed | <input type="checkbox"/> Employed <input type="checkbox"/> Not Employed | |
| Occupation | <u>Bartender/Server</u> | | |
| Employer's name | <u>Marriot International</u> | | |
| Employer's address | <u>2440 Victory Park Lane</u> Number Street | | |
| | | | |
| | | | |
| | | | |
| Dallas, TX 75219 | City | State | Zip Code |
| How long employed there? | 8 months | | |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|----------------------|--------------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. | 2. <u>\$3,202.39</u> | _____ |
| 3. Estimate and list monthly overtime pay. | 3. + <u>\$0.00</u> | + _____ |
| 4. Calculate gross income. Add line 2 + line 3. | 4. <u>\$3,202.39</u> | _____ |

Debtor 1 **Korto Nyemadah Hare** Case number (if known) **25-40689-13**

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|--|---|--|
| Copy line 4 here.....→ | 4. \$3,202.39 | |
| 5. List all payroll deductions: | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$244.97 | |
| 5b. Mandatory contributions for retirement plans | 5b. \$0.00 | |
| 5c. Voluntary contributions for retirement plans | 5c. \$96.07 | |
| 5d. Required repayments of retirement fund loans | 5d. \$0.00 | |
| 5e. Insurance | 5e. \$0.00 | |
| 5f. Domestic support obligations | 5f. \$0.00 | |
| 5g. Union dues | 5g. \$0.00 | |
| 5h. Other deductions. Specify: _____ | 5h. + \$0.00 | + _____ |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. | 6. \$341.04 | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. \$2,861.34 | |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. \$9,354.31 | |
| 8b. Interest and dividends | 8b. \$0.00 | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. \$0.00 | |
| 8d. Unemployment compensation | 8d. \$0.00 | |
| 8e. Social Security | 8e. \$0.00 | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____ | 8f. \$0.00 | |
| 8g. Pension or retirement income | 8g. \$0.00 | |
| 8h. Other monthly income. Specify: _____ | 8h. + \$0.00 | + _____ |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. \$9,354.31 | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | 10. \$12,215.65 | + _____ = \$12,215.65 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____ | 11. + \$0.00 | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies | 12. \$12,215.65 | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after you file this form? | <input checked="" type="checkbox"/> No. _____ | |
| <input type="checkbox"/> Yes. Explain: _____ | | |

| | | | | |
|----------|--------------|-----------------|-------------|---|
| Debtor 1 | Korto | Nyemadah | Hare | Case number (if known) <u>25-40689-13</u> |
| | First Name | Middle Name | Last Name | |

8a. Attached Statement

Living Pretty

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

| | |
|--------------------------|--------------------------|
| 1. Gross Monthly Income: | <u>\$6,737.60</u> |
|--------------------------|--------------------------|

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

| | |
|---|--------------------------|
| 2. Ordinary and necessary expense | \$0.00 |
| 3. Net Employee Payroll (Other than debtor) | \$0.00 |
| 4. Payroll Taxes | \$0.00 |
| 5. Unemployment Taxes | \$0.00 |
| 6. Worker's Compensation | \$0.00 |
| 7. Other Taxes | \$0.00 |
| 8. Inventory Purchases (Including raw materials) | \$0.00 |
| 9. Purchase of Feed/Fertilizer/Seed/Spray | \$0.00 |
| 10. Rent (Other than debtor's principal residence) | \$0.00 |
| 11. Utilities | \$0.00 |
| 12. Office Expenses and Supplies | \$0.00 |
| 13. Repairs and Maintenance | \$0.00 |
| 14. Vehicle Expenses | \$0.00 |
| 15. Travel and Entertainment | \$0.00 |
| 16. Equipment Rental and Leases | \$0.00 |
| 17. Legal/Accounting/Other Professional Fees | \$0.00 |
| 18. Insurance | \$0.00 |
| 19. Employee Benefits (e.g., pension, medical, etc.) | \$0.00 |
| 20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts | \$0.00 |
| TOTAL PAYMENTS TO SECURED CREDITORS | <u>\$0.00</u> |
| 21. Other Expenses | |
| Bank Fees | \$149.00 |
| Utilities | \$611.60 |
| Rent | \$5,100.00 |
| Freight and Courier | \$43.60 |
| TOTAL OTHER EXPENSES | <u>\$5,904.20</u> |
| 22. TOTAL MONTHLY EXPENSES(Add item 2 - 21) | <u>\$5,904.20</u> |

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

| | |
|--|------------------------|
| 23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) | <u>\$833.40</u> |
|--|------------------------|

Debtor 1

| | | |
|--------------|-----------------|-------------|
| Korto | Nyemadah | Hare |
| First Name | Middle Name | Last Name |

Case number (if known) 25-40689-13

8a. Attached Statement

KSJ Tax Services

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

| | |
|--------------------------|--------------------|
| 1. Gross Monthly Income: | <u>\$26,523.31</u> |
|--------------------------|--------------------|

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

| | |
|---|--------------------|
| 2. Ordinary and necessary expense | <u>\$0.00</u> |
| 3. Net Employee Payroll (Other than debtor) | <u>\$0.00</u> |
| 4. Payroll Taxes | <u>\$0.00</u> |
| 5. Unemployment Taxes | <u>\$0.00</u> |
| 6. Worker's Compensation | <u>\$0.00</u> |
| 7. Other Taxes | <u>\$0.00</u> |
| 8. Inventory Purchases (Including raw materials) | <u>\$0.00</u> |
| 9. Purchase of Feed/Fertilizer/Seed/Spray | <u>\$0.00</u> |
| 10. Rent (Other than debtor's principal residence) | <u>\$0.00</u> |
| 11. Utilities | <u>\$0.00</u> |
| 12. Office Expenses and Supplies | <u>\$0.00</u> |
| 13. Repairs and Maintenance | <u>\$0.00</u> |
| 14. Vehicle Expenses | <u>\$0.00</u> |
| 15. Travel and Entertainment | <u>\$0.00</u> |
| 16. Equipment Rental and Leases | <u>\$0.00</u> |
| 17. Legal/Accounting/Other Professional Fees | <u>\$0.00</u> |
| 18. Insurance | <u>\$0.00</u> |
| 19. Employee Benefits (e.g., pension, medical, etc.) | <u>\$0.00</u> |
| 20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts | <u>\$0.00</u> |
| TOTAL PAYMENTS TO SECURED CREDITORS | <u>\$0.00</u> |
| 21. Other Expenses | |
| Utilities | <u>\$173.40</u> |
| Bank Fees | <u>\$830.00</u> |
| Office Expenses | <u>\$578.00</u> |
| Payroll | <u>\$16,421.00</u> |
| TOTAL OTHER EXPENSES | <u>\$18,002.40</u> |
| 22. TOTAL MONTHLY EXPENSES(Add item 2 - 21) | <u>\$18,002.40</u> |

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

| | |
|--|-------------------|
| 23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) | <u>\$8,520.91</u> |
|--|-------------------|

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-----------------|-------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | Northern District of Texas | | |
| Case number (if known) | 25-40689-13 | | |

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

| | <input type="checkbox"/> No | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
|-------------------------------------|--|--|-----------------|---|
| Do not list Debtor 1 and Debtor 2. | <input checked="" type="checkbox"/> Yes. Fill out this information for each dependent..... | Child | 15 | <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. |
| Do not state the dependents' names. | | Child | 13 | <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. |
| | | Child | 11 | <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. |
| | | Child | 10 | <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. |
| | | Child | 9 | <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. |

* See Additional Page for Additional Dependents

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

| | |
|-----|--------|
| 4. | \$0.00 |
| 4a. | \$0.00 |
| 4b. | \$0.00 |
| 4c. | \$0.00 |
| 4d. | \$0.00 |

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

Debtor 1

| | | |
|--------------|-----------------|-------------|
| Korto | Nyemadah | Hare |
| First Name | Middle Name | Last Name |

Case number (if known) 25-40689-13

| | | Your expenses |
|------|--|----------------------|
| 5. | Additional mortgage payments for your residence , such as home equity loans | 5. _____ \$0.00 |
| 6. | Utilities: | |
| 6a. | Electricity, heat, natural gas | 6a. _____ \$427.00 |
| 6b. | Water, sewer, garbage collection | 6b. _____ \$129.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. _____ \$128.00 |
| 6d. | Other. Specify: _____ | 6d. _____ \$0.00 |
| 7. | Food and housekeeping supplies | 7. _____ \$1,200.00 |
| 8. | Childcare and children's education costs | 8. _____ \$0.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. _____ \$40.00 |
| 10. | Personal care products and services | 10. _____ \$150.00 |
| 11. | Medical and dental expenses | 11. _____ \$0.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. _____ \$260.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. _____ \$0.00 |
| 14. | Charitable contributions and religious donations | 14. _____ \$0.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| 15a. | Life insurance | 15a. _____ \$0.00 |
| 15b. | Health insurance | 15b. _____ \$0.00 |
| 15c. | Vehicle insurance | 15c. _____ \$297.00 |
| 15d. | Other insurance. Specify: _____ | 15d. _____ \$0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____ | 16. _____ \$0.00 |
| 17. | Installment or lease payments: | |
| 17a. | Car payments for Vehicle 1 <u>2023 Honda Odyssey</u> | 17a. _____ \$856.00 |
| 17b. | Car payments for Vehicle 2 | 17b. _____ \$0.00 |
| 17c. | Other. Specify: _____ | 17c. _____ \$0.00 |
| 17d. | Other. Specify: _____ | 17d. _____ \$0.00 |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. _____ \$0.00 |
| 19. | Other payments you make to support others who do not live with you. Specify: _____ | 19. _____ \$0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | |
| 20a. | Mortgages on other property | 20a. _____ \$0.00 |
| 20b. | Real estate taxes | 20b. _____ \$0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. _____ \$0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. _____ \$0.00 |
| 20e. | Homeowner's association or condominium dues | 20e. _____ \$0.00 |

Debtor 1

Korto **Nyemadah** **Hare**

First Name Middle Name Last Name

Case number (if known) **25-40689-13**

21. Other. Specify: _____

21. + _____ **\$0.00**

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. _____ **\$3,487.00**

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. _____ **\$0.00**

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. _____ **\$3,487.00**

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. _____ **\$12,215.65**

23b. Copy your monthly expenses from line 22c above.

23b. - _____ **\$3,487.00**

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. _____ **\$8,728.65**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Debtor 1

Korto **Nyemadah** **Hare**

First Name

Middle Name

Last Name

Case number (if known) **25-40689-13**

2. **Additional Dependents**

Dependent's relationship to
Debtor 1 or Debtor 2

Child

Dependent's
age

3

Does dependent live
with you?

No. Yes.

Amount

6c. Telephone, cell phone, Internet, satellite, and cable services

| | |
|------------|---------|
| Internet | \$38.00 |
| Cell Phone | \$90.00 |

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-----------------|-------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | Northern District of Texas | | |
| Case number (if known) | 25-40689-13 | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

| | | Your assets |
|-----|---|-----------------------|
| | | Value of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) | |
| 1a. | Copy line 55, Total real estate, from <i>Schedule A/B</i> | \$410,000.00 |
| 1b. | Copy line 62, Total personal property, from <i>Schedule A/B</i> | \$535,543.00 |
| 1c. | Copy line 63, Total of all property on <i>Schedule A/B</i> | \$945,543.00 |

Part 2: Summarize Your Liabilities

| | | Your liabilities |
|-----|---|-------------------------------|
| | | Amount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | |
| 2a. | Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> | \$267,692.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | |
| 3a. | Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$3,108.00 |
| 3b. | Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | + \$127,223.00 |
| | | Your total liabilities |
| | | \$398,023.00 |

Part 3: Summarize Your Income and Expenses

| | | |
|----|---|--------------------|
| 4. | Schedule I: Your Income (Official Form 106I) | |
| | Copy your combined monthly income from line 12 of <i>Schedule I</i> | \$12,215.65 |
| 5. | Schedule J: Your Expenses (Official Form 106J) | |
| | Copy your monthly expenses from line 22c of <i>Schedule J</i> | \$3,487.00 |

Debtor 1

Korto Nyemadah Hare

First Name

Nyemadah

Middle Name

Hare

Last Name

Case number (if known) 25-40689-13

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$1,794.87

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$0.00

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00

9d. Student loans. (Copy line 6f.) \$0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$0.00

9g. Total. Add lines 9a through 9f. \$0.00

Fill in this information to identify your case:

| | | | |
|---|-----------------------------------|-----------------|-------------|
| Debtor 1 | Korto | Nyemadah | Hare |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | Northern District of Texas | | |
| Case number (if known) | 25-40689-13 | | |

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____ Attach *Bankruptcy Petitioner's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

 /s/ Korto Nyemadah Hare
Korto Nyemadah Hare, Debtor 1

Date 03/12/2025
MM/ DD/ YYYY